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PETITION FOR EXTENSIO	Docket Number (Optional) PD020055					
In re Application of TIMOTHY HEIGHWAY ET AL.						
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Application Numb	er 10/520,049 F	iled December 29, 2004			
AUG 1 1 2006	For DATA LINK I BUS	For DATA LINK LAYER DEVICE FOR A SERIAL COMMUNICATION BUS				
TO TRADEMANA	Art Unit 2112	Art Unit 2112 Examiner Clifford H. Knoll				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and a	ppropriate non-small-entity fe	e are as follows (che	ck time period desired):			
One month (	37 CFR 1.17(a)(1))		\$			
	(37 CFR 1.17(a)(2))		\$ <u>450.00</u>			
☐ Three month	s (37 CFR 1.17(a)(3))		\$			
☐ Four months	s (37 CFR 1.17(a)(4))		\$			
☐ Five months	(37 CFR 1.17(a)(5))		\$			
	all entity status. See 37 CFR		fee amount shown			
above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.						
☐ Pavment by credit c	ard. Form PTO-2038 is attac	hed				
_ ,	ready been authorized to char		etion to a Denosit Account			
<del>_</del>	•					
	by authorized to charge any f syment, to Deposit Account N		quired,			
·	uplicate copy of this sheet.	umber <u>07-0832</u> .				
I am the  applicant						
assignee of record of the entire interest. See 37 CFR 3.71						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
attorney or agent of record. Registration Number 40.877						
attorney or agent under 37 CFR 1.34(a).						
Registration number if acting under 37 CFR 1.34(a)						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
August 9, 200	06	Cather	vie <u>A Ferguson</u> Signature			
Date			Signature			
(609) 734-6440	)	CAT	HERINE A. FERGUSON			
Telephone Num	ber		Typed or printed name			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
Total of 1 forms are submitted			Et la abanda la la la abanda la			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

08/11/2006 MGEBREM1 00000060 070832 If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

01 FC:1252 450.00 DA

Complete if Known

10/520,049

PTO/SB/17 (01/06)
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Application Number

pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## **TRANSMITTAL**

December 29, 2004 Filing Date for FY 2006 **Timothy Heighway** First Named Inventor Clifford H. Knoll Examiner Name ☐ Applicant claims small entity status. See 37 CFR 1 27 2112

Applicant claim	- Coman criticy	T		Art Unit	2112		•	
TOTAL AMOUNT O	F PAYMENT	(\$) 450	.00	Attorney Docket No.	PD020055	PD020055		
METHOD OF PAYMENT (	METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER: 24498							
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identity):								
🛚 Charge fe	entified deposite e(s) indicate ny additional 37 CFR 1.16 on this form m	account, the d below fee(s) or und and 1.17 ay become pul	Director is hereby	of 🛛 Credit any	eck all that apply e(s) indicated overpayment	y) below, <b>excep</b> ts	CENSING INC. It for the filing fee	
FEE CALCULATION	(All the fees I	below are du	e upon filing or	may be subject to	a surcharge.)			
1. BASIC FILING, SE	FILING FE			CH FEES Small Entity	EXAMINA	TION FEES Small En	ıtity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FI	=FQ	•				C	ntity	
2. EXCESS CLAIM FI					For	<u>Small E</u> e (\$)	intity Fee (\$)	
Each claim over 20 (inclu	dina Reissues)					<del>e (\$)</del> 50	25	
Each independent claim	•	Reissues)			20		100	
Multiple dependent claim		/				60 ·	180	
Total Claims		ra Claims	Fee (\$)	Fee Paid (\$)	<u>Mu</u>	Multiple Dependent (		
	or HP =	for if greats the	x ==	=	<u>Fe</u>	e (\$)	Fee Paid (\$)	
HP = highest number of t	otal Cialms paid	ior, ii greater th	iaii EU.				·	
Independent Claims		ra Claims	Fee (\$)	Fee Paid (\$)	— <del>.</del>		- <del>-</del>	
	or HP =	ne poid for "	X =	=				
HP = highest number of i	•	ms paid tor, if g	reater than 3.		•			
3. APPLICATION SIZ		<i>:</i>						
If the specification and								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra She	ets <u>N</u>		additional 50 or frac		Fee (\$)	Fee Paid (\$)	
- 100 =		<u>/.50 =</u>	(roui	nd <b>up</b> to a whole nui	mber) x	· · · · · ·	=	
4. OTHER FEE(S)						Fees Paid (\$)		
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): PETITION FOR 2 MONTH EXTENSION \$1628.86								
							\$450.00	
1	•							

SUBMITTED BY					
Name (Print/Type)	CATHERINE A. FERGUSON	Registration No. (Attorney/Agent)	40,877	Telephone	(609) 734-6440
Signature	Catherine a	Fergusen			August 9, 2006